2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000000197

FILED Apr 15, 2007 Secretary of State

Entity Name: RIVERWOOD COUNTRY ESTATES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

8017 RIVERWOODS ESTATES PLACE 8021 RIVERWOOD ESTATES PLACE

RIVERVIEW, FL 33569 RIVERVIEW, FL 33569

Current Mailing Address: New Mailing Address:

8017 RIVERWOODS ESTATES PLACE 8021 RIVERWOOD ESTATES PLACE

RIVERVIEW, FL 33569 RIVERVIEW, FL 33569

FEI Number: 03-0376962 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

SMITH, WENDY P ZEPKA, JAMES M

8017 RIVERWOOD ESTATES PLACE 8021 RIVERWOOD ESTATES PLACE RIVERVIREW, FL 33569 RIVERVIREW, FL 33569

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: WENDY P. SMITH 04/15/2007

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Address:

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition

ZEPKA, JAMES M SMITH, WENDY P Name: Name:

8017 RIVERWOOD ESTATES PL Address: 8021 RIVERWOOD ESTATES PL Address:

RIVERVIEW, FL 33569 City-St-Zip: City-St-Zip: RIVERVIEW, FL 33569

Title: SD () Delete Title: (X) Change () Addition

ZIMBLER, KATHY Name: MIRANDA, DEANNE Name: Address: 8013 RIVERWOOD ESTATES PLACE Address: 8008 RIVERWOOD ESTATES PLACE

City-St-Zip: RIVERVIEW, FL 33569 City-St-Zip: RIVERVIEW, FL 33569

Title: PD () Delete Title: (X) Change () Addition

MARKUS, MICHAEL STEVEN, ZIMBLER Name: Name:

8012 RIVERWOOD ESTATES PL 8013 RIVERWOOD ESTATES PL Address: Address:

City-St-Zip: RIVERVIEW, FL 33569 City-St-Zip: RIVERVIEW, FL 33569

Title: (X) Delete Title: () Change () Addition Name:

ZIMBLER, STEVE Name: 8013 RIVERWOOD ESTATE PL. Address: RIVERVIEW, FL 33569 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WENDY P. SMITH TD 04/15/2007